

☐ VOID ☐ CORRECTED

PAYER'S name, street address, city, state, and ZIP code ABC Company		1 Gross distribution \$ 20,000.00		OMB No. 1545-0119 2005 Form 1099-R	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2005 General Instructions for Forms 1099, 1098, 5498, and W-2G.	
		2a Taxable amount \$ 2,500.00				
		2b Taxable amount not determined <input type="checkbox"/>				Total distribution <input type="checkbox"/>
PAYER'S Federal identification number 84-9876543	RECIPIENT'S identification number	3 Capital gain (included in box 2a) \$	4 Federal income tax withheld \$ 599.66			
RECIPIENT'S name John J. Taxpayer		5 Employee contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$		
Street address (including apt. no.) 900 N 500 W		7 Distribution code(s)	IRA/SEP/SIMPLE <input type="checkbox"/>	8 Other \$ %		
City, state, and ZIP code My Town, UT 84000		9a Your percentage of total distribution %		9b Total employee contributions \$		
Account number (optional)		10 State tax withheld \$ 336.20		11 State/Payer's state no. UT Y12345		12 State distribution \$
		13 Local tax withheld \$		14 Name of locality		15 Local distribution \$

Form 1099-R

Cat. No. 14436Q

Department of the Treasury - Internal Revenue Service

Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page

State tax withheld

State and State Account no.